DEC 2 8 2005



## United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address Commissioning FOR PATENTS F.O. Box 1450 Mgbla 22313-1450 Alexadia, Vighia 22313-1450

## NOTICE OF ALLOWANCE AND FEE(S) DUE

CHIH-CHING HSIEN
235 CHUNG-HO BOX 8-24
TAIPEI HSIEN, 235
TAIWAN

EXAMINER

MULLER, BRYAN R

ART UNIT PAPER NUMBER

3723

DATE MAILED: 10/06/2005

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/791,613	03/03/2004	Chang-Ying Chen	J5P4013-GFP-922460	2665

TITLE OF INVENTION: RATCHET OPENER

APPLN. TYPE	SMAIJ. PNTITY	LSSUE FER	PUBLICATION FEB	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	01/06/2006

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

## HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.
- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

- II. PART B FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fec(s) have already been paid, Part B Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

Page 1 of 3

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

## PART B - FEE(S) TRANSMITTAL

RECEIVED **CENTRAL FAX CENTER** 

DEC 2 8 2005

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 or Fax

ired). Blocks 1 through 5 should be completed where

COMMUNICATION OF THE PROPERTY	E ADDKESS (Note: Use Block 1 for	and countries of enquery)		Note: A certificate	of mailing can only be used for This certificate connot be used f	r domestic mailings of t
				papers. Each additi	ous of walling or transmission.  Lus octuiness crimes of isset t	nt or formal drawing, mu
46643 75			•			
CHIH-CHING H				I hereby certify that	Certificate of Mailing or Trans t this Fee(s) Transmittal is being	meson deposited with the Unit
TAIPEI HSIEN, 23				States Postal Service addressed to the A	t this Fec(s) Transmittal is being to with sufficient postage for firs Anil Stop ISSUR FRH address ISPTO (571) 273-2885, on the d	st class mail in an envelo above, or being faction
TAIWAN				transmitted to the U	ISPTO (571) 273-2885, on the d	
						(Depositor's nem
•						(Signator
		· · · · · · · · · · · · · · · · · · ·				(Dai
APPLICATION NO.	FILING DATE	<u> </u>	FIRST NAME	<del></del>	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/791,613 TLE OF INVENTION: RA	03/03/2004 ATCHET OPENER	÷	Chang-Yi	ng Chen	J51'4013-GFT-922460 .	2665
АРРІМ, ТУРВ	SMALL ENTITY	TŞ ŞUB I	PEB	FUBLICATION PEB	TOTAL PEE(S) DUE	DATE DUE
nonprovisional	YES	\$70	0	\$300	\$1000	01/06/2006
KXAM	INER	ART U	NIT	CLASS-SUBCLASS		•
MULLER,	BRYAN R	372	3	081-058300	_	
Change of correspondence	address or indication of "P	oc Address* (37	2. For prin	ting on the patent front page	List	•
R 1.363).  Change of corresponds	ence address for Change of	Correspondence	(1) the nat	mes of up to 3 registered pa OR, uhematively,	icnt attorneys	
☐ Change of correspondence address (or Change of Corr Address form PTO/SB/I22) attached.		••••				
			(2) the nar	nc of a single firm (having (	us a member a 2	
	ion (or "Pee Address" Indica or more recent) attached. Us		registered 2 registere	ne of a single firm (having a attorney or agent) and the n d palent attorneys or agents. name will be printed.	as a member a 2 assess of up to . If no name is 3	
"Fee Address" indicate PTO/SB/47; Rev 03-02 o Number is required.	ion (or "Fee Address" Indica r more recent) attached. Use	ation form s of a Customer	registered 2 registere listed, no r	attorney or agent) and the n d palent altorneys or agents. name will be printed.	as a member a ames of up to If no name is 3	
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND	ton (or "Fee Address" Indica or more recent) attached. Us RESIDENCE DATA TO H	ation form s of a Customer E PRINTED ON	registered 2 registere listed, no r	attorney or agent) and the n d palent attorneys or agents. name will be printed.  (print or type)	ames of up to If no name is 3	ocument has been filed i
"Fee Address" indicate PTO/SB/47; Rev 03-02 o Number is required. ASSIGNEE NAME AND	ton (or "Fee Address" Indica or more recent) attached. Us RESIDENCE DATA TO H	ation form a of a Customer E PRINTED ON slow, no assignee of this form is NO	registered 2 registere 2 registere listed, no r THE PATENT data will app T a substitute	attorney or agent) and the n d palent attorneys or agents. ame will be printed.  (print or type) ear on the potent. If an ass for filing an assignment.	ames of up to If no name is 3	ocument has been filed i
"Fee Address" indicate PTO/SB/47; Rev 03-02 o Number is required. ASSIGNEE NAME AND	ton (or "Fee Address" Indica ir more recent) attached. Use RESIDENCE DATA TO He an assignoo is identified be 37 CFR 3,11. Completion	ation form a of a Customer E PRINTED ON slow, no assignee of this form is NO	registered 2 registere 2 registere listed, no r THE PATENT data will app T a substitute	attorney or agent) and the n d palent attorneys or agents. name will be printed.  (print or type)	ames of up to If no name is 3	ocument has been filed i
"Fee Address" indicate FTO/SD/47; Rev 03-02 o Number is required. ASSIGNIE NAME AND PLEASE NOTE: Unless recordation as set forth in	ton (or "Fee Address" Indica ir more recent) attached. Use RESIDENCE DATA TO He an assignoo is identified be 37 CFR 3,11. Completion	ation form a of a Customer E PRINTED ON slow, no assignee of this form is NO	registered 2 registere 2 registere listed, no r THE PATENT data will app T a substitute	attorney or agent) and the n d palent attorneys or agents. ame will be printed.  (print or type) ear on the potent. If an ass for filing an assignment.	ames of up to If no name is 3	ocument has been filed t
"Fee Address" indicate FTO/Sis/47; Rev 03-02 o Number is required. ASSIGNIE NAME AND PLEASE NOTE: Unless recordation as set furth in (A) NAME OF ASSIGNI	ton (or "Fee Address" Indices more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3,11. Completion	ation form a of a Customer IE PRINTED ON IE PRINTED ON	registered 2 registere 1 isted, no r THE PATENT data will app of a substitute  B) RESIDENC	attorney or agent) and the n d pelent attorneys or agents. amne will be printed.  (print or type) car on the putent. If an ass for filing an assignment.  E: (CITY and STATE OR C	ignee is identified below, the de	_
"Fee Address" indicate FTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNATION OF ASSIGNATI	ton (or "Fee Address" Indices more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3.11. Completion	ation form a of a Customer  IE PRINTED ON elow, no assignee of this form is NO	registered 2 registered 2 registere 1 area 2 registere 1 area 2 registere 1 area 2 registere 2 registere 2 registere 2 registere 3 registere 3 registere 3 registere 3 registere 3 registere 4 registere 5 registere 6 registere 7 registe	atterney or agent) and the n d pelent alterneys or agents. amne will be printed.  (print or type) ear on the patent. If an ass for filing an assignment.  E: (CITY and STATE OR Catent):	ames of up to If no name is 3	_
"Fee Address" indicate FTO/Sis/47; Rev 03-02 o Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set furth in (A) NAME OF ASSIGNEE CASE CONTROL OF ASSIGNEE CASE Check the appropriate. The following fee(s) are designed.	ton (or "Fee Address" Indices more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3.11. Completion	ation form a of a Customer  IE PRINTED ON elow, no assignee of this form is NO	registered 2 registered 2 registered 2 registered to 2 registere (at 2 registere) and 2 registered to 2 regist	attorney or agent) and the n d pelent attorneys or agents.  I (print or type) car on the putent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):    Individual	ignee is identified below, the dicountry)  Corporation or other private gre	_
"Fee Address" indicate FIO/Sis/47; Rev 03-02 of Number is required.  ASSIGNIE! NAME AND PLEASE NOTE: Unless recordation as set furth in (A) NAME OF ASSIGNITION (A) NAME OF ASSIGNITION (B) The following fee(s) are of Ipeno Fee	ton (or "Fee Address" Indices more recent) attached. Use RESIDENCE DATA TO He an assignor is identified to 37 CFR 3,11. Completion IE	ation form a of a Customer  IF PRINTED ON HE PRINTED ON Of this form is NO  mics (will not be p	registered 2 registere listed, no a THE PATENT data will app of a substitute B) RESIDENC minted on the p b. Payment of A check	attorney or agent) and the in d pelent attorneys or agents. In an assignment of the patent. If an ass for filing an assignment.  E: (CITY and STATE OR Content): Individual Fec(s):  in the anyount of the fec(s) is	ignee is identified below, the dicountry)  Corporation or other private green enclosed.	_
"Fee Address" indicate FTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNIL! NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNITION (A) NAME OF ASSIGNITION (B) The following fee(s) are of the period	ion (or "Fee Address" Indices more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3.11. Completion IC assignee category or categorical control of the category of categorical control of the category of categorical control of the category of categorical category of categorical category of categorical category of categorical categorica	ation form a of a Customer  IF PRINTED ON HE PRINTED ON Of this form is NO  mics (will not be p	THE PATENT data will app of a substitute B) RESIDENC trinted on the p b. Psyment of A check C Psyment The Directors and the position of the p Tayment The Directors are the position of the po	attorney or agent) and the in deplete altorneys or agents. In an assignment will be printed.  (print or type) car on the potent. If an ass for filing an assignment.  E: (CITY and STATE OR Content): Individual In the amount of the foc(s) is by credit card. Form PTO-2 actor is hereby authorized by	ignee is identified below, the decoupling or other private gradeneous decoupling or other privat	oup entity
"Fee Address" indicate PTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNIET NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIET.  CAN PARE OF ASSIGNIET.  The following fee(s) are of the properties.  The following fee(s) are of the properties.  Advance Order - # of	ton (or "Fee Address" Indices more recent) attached. Use RESIDENCE DATA TO He an assignoe is identified by 37 CFR 3.11. Completion 12. assignee category or categorical conclused:  mall entity discount permitte Copies.	ation form a of a Customer BE PRINTED ON clow, no assignee of this form is NO () mics (will not be p 4	THE PATENT data will app of a substitute B) RESIDENC trinted on the p b. Psyment of A check C Psyment The Directors and the position of the p Tayment The Directors are trinted on the p Tayment The Directors are trinted to the position of	attorney or agent) and the in d pelent attorneys or agents. In an assignment of the potent. If an ass for filing an assignment.  E: (CITY and STATE OR Content): Individual Fec(s):  In the amount of the fec(s) is by credit card. Form PTO-26	ames of up to  If no name is 3  ignee is identified below, the de  COUNTRY)  Corporation or other private gra enclosed.  038 is strached.	oup entity
"Fee Address" indicate FTO/SIJ/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless reconduction as set forth in (A) NAME OF ASSIGNIE eare check the appropriate. The following fee(s) are of Teublication Fee (No are Advance Order - # of Change in Entity Status (  D. Applicant claims Sh	ion (or "Fee Address" Indicar more recent) attached. Use RESIDENCE DATA TO He an assignee is identified by 37 CFR 3.11. Completion IC assignee category or categorical centry discount permitte Copies (from status Indicated above MALL INTITY status, See	ation form a of a Customer  BE PRINTED ON elow, no assignee of this form is NO  (() mics (will not be p  4  ad)  37 CFR 1.27.	registered 2 registere 2 registered 2 registered 2 registere 2 registere 2 registere 2 registered 2 registere	attorney or agent) and the n d petent attorneys or agents.  I (print or type) ear on the patent. If an ass for filing an assignment.  E: (CITY and STATE OR Catent): I individual Fec(s): in the amount of the foc(s) is by credit earl. Form PTO-20 to the foce in hereby authorized by our t Number.	ignee is identified below, the decountry)  Corporation or other private grace enclosed.  OSR is strached.  y charge the required fee(s), or (enclose an extra contact the required fee).	one centity Government.  crodit any overpayment, opp of this form).
"Fee Address" indicate FTO/SI/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless reconduction as set forth in (A) NAME OF ASSIGNE eare check the appropriate. This following fee(s) are of Publication Fee (No are Advance Order - # of Change in Entity Status (C) n. Applicant claims Sh	ion (or "Fee Address" Indicar more recent) attached. Use RESIDENCE DATA TO He an assignee is identified by 37 CFR 3.11. Completion IC assignee category or categorical centry discount permitte Copies (from status Indicated above MALL INTITY status, See	ation form a of a Customer  BE PRINTED ON elow, no assignee of this form is NO  (() mics (will not be p  4  ad)  37 CFR 1.27.	registered 2 registere 2 registered 2 registered 2 registere 2 registere 2 registere 2 registered 2 registere	attorney or agent) and the n d petent attorneys or agents.  I (print or type) ear on the patent. If an ass for filing an assignment.  E: (CITY and STATE OR Catent): I individual Fec(s): in the amount of the foc(s) is by credit earl. Form PTO-20 to the foce in hereby authorized by our t Number.	ignee is identified below, the decountry)  Corporation or other private grace enclosed.  OSR is strached.  y charge the required fee(s), or (enclose an extra contact the required fee).	one centity Government.  crodit any overpayment, opp of this form).
"Fee Address" indicate FIO/Sis/47; Rev 03-02 of Number is required.  ASSIGNITE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNITE (A) NAME OF ASSIGNITE (B) Publication Fee (No sr D) Publication Fee (No sr D) Publication Fee (No sr D) Advance Order - # of Change in Entity Status (C) n. Applicant claims Sh ne Director of the USITO TOTE: The Issue Fee and Putters as shown by the reco	ion (or "Fee Address" Indicar more recent) attached. Use RESIDENCE DATA TO He an assignee is identified by 37 CFR 3.11. Completion IC assignee category or categorical control of the control of the control of the category of categorical categorica	ation form a of a Customer  BE PRINTED ON elow, no assignee of this form is NO  (() mics (will not be p  4  ad)  37 CFR 1.27.	registered 2 registere 2 registered 2 registered 2 registere 2 registere 2 registere 2 registered 2 registere	attorney or agent) and the in deplete altorneys or agents, amne will be printed.  (print or type) ear on the potent. If an ass for filing an assignment.  E: (CITY and STATE OR Content): Individual I	ignee is identified below, the discountry)  Corporation or other private gradenessed.  OSB is strached.  y charge the required fee(s), or (mulcose an extra or control or other private and extra or control or other private gradenessed.	one centity Government.  crodit any overpayment, opp of this form).
"Fee Address" indicate FTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNET NAME AND PLEASE NOTE: Ualess recordation as set forth in (A) NAME OF ASSIGNITION (A) NAME OF ASSIGNITION (B) Publication Fee (No are C) Publication Fee (No are	ton (or "Fee Address" Indicate more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3,11. Completion in assigner category or category category or category category of category category declared:  mall entity discount permitted copies  (from status indicated above MALL INTITY status. See the category of the United States Patents of the United States of the United St	ation form a of a Customer  BE PRINTED ON elow, no assignee of this form is NO  (() mics (will not be p  4  ad)  37 CFR 1.27.	registered 2 registere 2 registered 2 registered 2 registere 2 registere 2 registere 2 registered 2 registere	attorney or agent) and the in deplete attorneys or agents, amne will be printed.  (print or type) ear on the potent. If an ass for filing an assignment.  E: (CITY and STATE OR Content): Individual I	ames of up to.  If no name is 3  ignee is identified below, the decountry)  Corporation or other private grave enclosed.  O38 is attached.  y charge the required fee(s), or (enclose an extra or the enclose and extra or the enclose and extra or the enclose at the enclose and extra or the enclose at the enclose of the enc	one centity Government.  crodit any overpayment, opp of this form).
□ "Fee Address" indicate FTO/Sis/47; Rev 03-02 of 20-03-02 of 20-03-02 of 20-03-02 of 20-03-02 of 20-03-02 of 20-03-03-03-03-03-03-03-03-03-03-03-03-03	ton (or "Fee Address" Indicate more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3,11. Completion in assigner category or category category or category category of category category declared:  """  """  """  """  """  ""  """  "	ation form a of a Customer of a Customer of a Customer of a Customer of the PRINTED ON elow, no assignee of this form is NO (() orics (will not be post)  37 CFR 1.27.  Le Fee and Publication of the accepte and Trademark	rigistered 2 registere listed, no a THE PATENT data will apport a substitute B) RESIDENC minted on the p b. Payment of A check in Payment of Deposit According to the position of the position	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the putent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(a): in the amount of the fec(a) is by credit card. Form PTO-20 actor is hereby authorized by out Number  unt is no longer claiming SN by) or to re-apply any pravious other than the applicant; as a Registrative of the proposal of the content of the publicant; as a content of the publicant of the publ	ames of up to.  If no name is 3  ignee is identified below, the decountry)  Corporation or other private gradeness.  Co	erodit any overpayment, opy of this form).  FR 1-27(g)(2).  Ition identified above, he hassignee or other party
Profess Address indicate Profess 447; Rev 03-02 of Number is required.  ASSIGNIE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE. The following fee(s) are of the profess of the profess of the profess of the control of the USPTO of the	ton (or "Fee Address" Indicate more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3,11. Completion in assigner category or category category or category category of category category declared:  """  """  """  """  """  ""  """  "	ation form a of a Customer of a Customer of a Customer of a Customer of the PRINTED ON elow, no assignee of this form is NO (() orics (will not be post)  37 CFR 1.27.  Le Fee and Publication of the accepte and Trademark	rigistered 2 registere listed, no a THE PATENT data will apport a substitute B) RESIDENC minted on the p b. Payment of A check in Payment of Deposit According to the position of the position	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the putent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(a): in the amount of the fec(a) is by credit card. Form PTO-20 actor is hereby authorized by out Number  unt is no longer claiming SN by) or to re-apply any pravious other than the applicant; as a Registrative of the proposal of the content of the publicant; as a content of the publicant of the publ	ames of up to.  If no name is 3  ignee is identified below, the decountry)  Corporation or other private gradeness.  Co	erodit any overpayment, opy of this form).  FR 1-27(g)(2).  Ition identified above, he hassignee or other party
□ "Fee Address" indicate FTO/Sis/47; Rev 03-02 of 20-03-02 of 20-03-02 of 20-03-02 of 20-03-02 of 20-03-02 of 20-03-03-03-03-03-03-03-03-03-03-03-03-03	ton (or "Fee Address" Indicate more recent) attached. Use RESIDENCE DATA TO He an assignor is identified by 37 CFR 3,11. Completion in assigner category or category category or category category of category category declared:  """  """  """  """  """  ""  """  "	ation form a of a Customer of a Customer of a Customer of a Customer of the PRINTED ON elow, no assignee of this form is NO (() orics (will not be post)  37 CFR 1.27.  Le Fee and Publication of the accepte and Trademark	rigistered 2 registere listed, no a THE PATENT data will apport a substitute B) RESIDENC minted on the p b. Payment of A check in Payment of Deposit According to the position of the position	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the putent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(a): in the amount of the fec(a) is by credit card. Form PTO-20 actor is hereby authorized by out Number  unt is no longer claiming SN by) or to re-apply any pravious other than the applicant; as a Registrative of the proposal of the content of the publicant; as a content of the publicant of the publ	ames of up to.  If no name is 3  ignee is identified below, the decountry)  Corporation or other private gradeness.  Co	erodit any overpayment, opy of this form).  FR 1-27(g)(2).  Ition identified above, he hassignee or other party
"Fee Address" indicate FTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recondation us set forth in (A) NAME OF ASSIGNIE  eare check the appropriate  The following fee(s) are of the control of the	ton (or "Fee Address" Indicar more recent) attached. Use more recent) attached. Use RESIDENCE DATA TO He an assignoe is identified by 37 CFR 3.11. Completion of the Completio	ation form a of a Customer of a Customer of a Customer of a Customer of the PRINTED ON elow, no assignee of this form is NO (() orics (will not be post)  37 CFR 1.27.  Le Fee and Publication of the accepte and Trademark	rigistered 2 registere listed, no a THE PATENT data will apport a substitute B) RESIDENC minted on the p b. Payment of A check in Payment of Deposit According to the position of the position	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the putent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(a): in the amount of the fec(a) is by credit card. Form PTO-20 actor is hereby authorized by out Number  unt is no longer claiming SN by) or to re-apply any pravious other than the applicant; as a Registrative of the proposal of the content of the publicant; as a content of the publicant of the publ	ames of up to.  If no name is 3  ignee is identified below, the decountry)  Corporation or other private grave enclosed.  O38 is attached.  y charge the required fee(s), or (enclose an extra or the enclose and extra or the enclose and extra or the enclose at the enclose and extra or the enclose at the enclose of the enc	erodit any overpayment, opy of this form).  FR 1-27(g)(2).  Ition identified above, he hassignee or other party
"Fee Address" indicate PTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNIE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE.  Ease check the appropriate. The following fee(s) are of fee in Advance Order - # of Change in Entity Status of Director of the USPTO in The Issue Fee and Purcess as shown by the reconstitution of information upplication, Confidentialing the completed application, Confidentialing the completed application, Confidentialing the completed application, Cleanage as form and/or suggestions in 1450, Alexandria, Virginia 22313-	ton (or "Fee Address" Indicate more recent) attached. Use the more recent) attached. Use RESIDENCE DATA TO He an assignoe is identified by 37 CFR 3,11. Completion in assignee category or category or category or category of	ation form a of a Customer of this form is NO (in the customer of this form is NO (in the customer of this form is NO (in this for	registered 2 registere listed, no s THE PATENT data will apport a substitute B) RESIDENC  trinted on the p b, Psyment of A check i Psyment of Deposit Acc  b. Application Fee (if mad from anyone coffice.	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the patent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(a): in the amount of the fec(a) is by credit card. Form PTO-20 actor is hereby authorized by out Number  Date  Registration obtain or retain a benefit is lection is estimated to take a position officer, U.S. Patent of FORMS TO THIS ADDRI	ames of up to.  If no name is 3  ignee is identified below, the decountry)  Corporation or other private gradeness.  Co	arodit any overpayment, opy of dis form).  FR 1.27(g)(2).  It on identified above, the nasignee or other party of the USPTO to process g gathering, preparing, an eyou require to complement of Commerce, P. for Patents, P.O. Box 145
"Fee Address" indicate PTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNIE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE.  Ease check the appropriate. The following fee(s) are of fee in Advance Order - # of Change in Entity Status of Director of the USPTO in The Issue Fee and Purcess as shown by the reconstitution of information upplication, Confidentialing the completed application, Confidentialing the completed application, Confidentialing the completed application, Cleanage as form and/or suggestions in 1450, Alexandria, Virginia 22313-	ton (or "Fee Address" Indicate more recent) attached. Use the more recent) attached. Use RESIDENCE DATA TO He an assignoe is identified by 37 CFR 3,11. Completion in assignee category or category or category or category of	ation form a of a Customer of this form is NO (in the customer of this form is NO (in the customer of this form is NO (in this for	registered 2 registere listed, no s THE PATENT data will apport a substitute B) RESIDENC  trinted on the p b, Psyment of A check i Psyment of Deposit Acc  b. Application Fee (if mad from anyone coffice.	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the patent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(a): in the amount of the fec(a) is by credit card. Form PTO-20 actor is hereby authorized by out Number  Date  Registration obtain or retain a benefit is lection is estimated to take a position officer, U.S. Patent of FORMS TO THIS ADDRI	ames of up to.  If no name is 3  ignee is identified below, the decoupling or other private grounds are conclused.  OSB is strached.  y charge the required fee(s), or (meluse an extra concluse an extra conclusion.  ALL ENTITY status. See 37 Clausly paid issue fee to the applicate antorney or agent, or the public which is to file (and 2 minutes to complete, including comments or the amount of tip of modernary of the grounds of the amount of tip of the comments of the amount of tip of Trudernary Office, U.S. Dept. 23S. SEND TO: Commissioner in the state of the contract of the comments of the state of the comments of the comments of the state of the comments of the comments of the state of the comments of the comme	arodit any overpayment, opy of dis form).  FR 1.27(g)(2).  It on identified above, the nasignee or other party of the USPTO to process g gathering, preparing, an eyou require to complement of Commerce, P. for Patents, P.O. Box 145
Pro/Sis/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE AND PROPERTY OF ASSIGNIE AND PROPERTY OF THE ISLAND FOR T	ton (or "Fee Address" Indicate more recent) attached. Use the more recent) attached. Use RESIDENCE DATA TO He an assignoe is identified by 37 CFR 3,11. Completion in assignee category or category or category or category of	ation forms of a Customer of this form is NO (i) or ics (will not be possible of a Customer of the customer of a Customer of the customer	registered 2 registere listed, no s THE PATENT data will apport a substitute B) RESIDENC  trinted on the p b, Psyment of A check i Psyment of Deposit Acc  b. Application Fee (if mad from anyone coffice.	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the potent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(s): In the amount of the fec(s) is by credit curd. Form PTO-20 artor is hereby authorized by ourst Number  and is no longer claiming Should by or to re-apply any pravious other than the applicant; as a Registrative or the state of	ames of up to.  If no name is 3  ignee is identified below, the decoupling or other private grounds are conclused.  OSB is strached.  y charge the required fee(s), or (meluse an extra concluse an extra conclusion.  ALL ENTITY status. See 37 Clausly paid issue fee to the applicate antorney or agent, or the public which is to file (and 2 minutes to complete, including comments or the amount of tip of modernary of the grounds of the amount of tip of the comments of the amount of tip of Trudernary Office, U.S. Dept. 23S. SEND TO: Commissioner in the state of the contract of the comments of the state of the comments of the comments of the state of the comments of the comments of the state of the comments of the comme	arodit any overpayment, opy of this form).  FR 1-27(g)(2).  tion identified above, as nasignee or other party  i by the USPTO to process g gathering, preparing, as ne you require to complearment of Commerce, P.  for Patents, P.O. Box 143 number.
"Fee Address" indicate FTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNIE	ton (or "Fee Address" Indicar more recent) attached. Use RESIDENCE DATA TO He an assignos is identified by 37 CFR 3.11. Completion III.  assignee category or categor enclosed:  mall entity discount permitte. Copies  (from status indicated above MALL INTITY status. See is requested to apply the Issubilication Fee (if required) with the second of the United States Pater Second III.  Charles Type III.  In is required by 37 CFR 1.1 by is governed by 35 U.S.C. for reducing this burden, at an interest and interest at the second III.  In its required by 37 CFR 1.1 by is governed by 35 U.S.C. for reducing this burden, at an interest and interest at the second III.  In its required by 37 CFR 1.1 by its reducing this burden, at an interest at the second III.  In its required by 37 CFR 1.1 by its reducing this burden, at an interest at the second III.  In its required by 37 CFR 1.1 by its reducing this burden, at an interest at the second III.	ation forms of a Customer of this form is NO (i) or ics (will not be possible of a Customer of the customer of a Customer of the customer	registered 2 registere listed, no a THE PATENT data will apport a substitute B) RESIDENC minted on the p b. Payment of A check in Payment of The Director of the point According to the point of the point According to the point Acc	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the potent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(s): In the amount of the fec(s) is by credit curd. Form PTO-20 artor is hereby authorized by ourst Number  and is no longer claiming Should by or to re-apply any pravious other than the applicant; as a Registrative or the state of	ignee is identified below, the discountry)  Corporation or other private gradeness.  Consider the required fee(s), or employed an extra or employed an extra or employed and extra or employed and extra or employed an extra or employed an extra or employed an extra or employed extra or employed extra or extra or extra or extra or employed extra or extra	arodit any overpayment, opy of this form).  FR 1-27(g)(2).  tion identified above, as nasignee or other party  i by the USPTO to process g gathering, preparing, as ne you require to complearment of Commerce, P.  for Patents, P.O. Box 143 number.
"Fee Address" indicate PTO/Sis/47; Rev 03-02 of Number is required.  ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNEE	ton (or "Fee Address" Indicar more recent) attached. Use RESIDENCE DATA TO He an assignos is identified by 37 CFR 3.11. Completion III.  assignee category or categor enclosed:  mall entity discount permitte. Copies  (from status indicated above MALL INTITY status. See is requested to apply the Issubilication Fee (if required) with the second of the United States Pater Second III.  Charles Type III.  In is required by 37 CFR 1.1 by is governed by 35 U.S.C. for reducing this burden, at an interest and interest at the second III.  In its required by 37 CFR 1.1 by is governed by 35 U.S.C. for reducing this burden, at an interest and interest at the second III.  In its required by 37 CFR 1.1 by its reducing this burden, at an interest at the second III.  In its required by 37 CFR 1.1 by its reducing this burden, at an interest at the second III.  In its required by 37 CFR 1.1 by its reducing this burden, at an interest at the second III.	ation forms of a Customer of this form is NO (i) or ics (will not be possible of a Customer of the customer of a Customer of the customer	registered 2 registere listed, no a THE PATENT data will apport a substitute B) RESIDENC minted on the p b. Payment of A check in Payment of The Director of the point According to the point of the point According to the point Acc	attorney or agent) and the in depleted attorneys or agents, amne will be printed.  (print or type) ear on the potent. If an ass for filing an assignment.  E: (CITY and STATE OR Content):  Individual  Fec(s): In the amount of the fec(s) is by credit curd. Form PTO-20 artor is hereby authorized by ourst Number  and is no longer claiming Should by or to re-apply any pravious other than the applicant; as a Registrative or the state of	ignee is identified below, the discountry)  Corporation or other private gradeness.  Consider the required fee(s), or employed an extra or employed an extra or employed and extra or employed and extra or employed an extra or employed an extra or employed an extra or employed extra or employed extra or extra or extra or extra or employed extra or extra	arodit any overpayment, opy of this form).  FR 1-27(g)(2).  tion identified above, as nasignee or other party  i by the USPTO to process g gathering, preparing, as ne you require to complearment of Commerce, P.  for Patents, P.O. Box 143 number.

PAGE 2/2

	* C 1. 180 9 1	
The PTO did listed item(s)_	not receive	the following
listed item(s)_	check	